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BOX PATENT APPLICATION
 The Commissioner of Patents
 and Trademarks
 Washington, D.C. 20231

Docket No. 18000.8481.0

NEW APPLICATION TRANSMITTAL

SIR:

Transmitted herewith for filing is the patent application of Inventor(s):
Celso S. Bagaoisan, John P. Shanahan, Ketan P. Muni, L. Hammock, R. M. Abrams, James C. Peacock, III, and
William S. Tremulis

Title: INTRAVASCULAR CATHETER WITH A REPLACEABLE SHAFT SECTION

CERTIFICATION UNDER 37 CFR §1.10

I hereby certify that this New Application and the documents referred to as enclosed herein are being deposited with the United States Postal Service on this date May 27, 1994, in an envelope bearing "Express Mail Post Office To Addressee" Mailing Label Number RB 988317856 US addressed to: BOX PATENT APPLICATION, The Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Mari Kleindam
 (Name of person mailing paper)

Mari Kleindam
 Signature

Enclosed are:

1. X The papers required for filing date under CFR §1.53(b):
24 Pages of specification (including 16 claims);
3 Sheet of drawings.
 formal
X informal
2. X Declaration or Oath (unsigned)
3. X Power of Attorney (unsigned)
4. Assignment of the invention to _____
5. Fee Calculation:
 Amendment changing number of claims or deleting multiple dependencies is enclosed.

CLAIMS AS FILED

	Number filed	Number Extra*	Rate	Basic Fee \$ 710.00
Total Claims	24 - 20 = 4	4	x \$37.00	\$ 148.00
Independent Claims	7 - 3 = 4	4	x \$74.00	\$ 296.00
<u> </u> Multiple dependent claim(s), if any			x \$.00	\$-0-

*If less than zero, enter "0".

6. Small Entity Statement - verified statement enclosed
 50% Filing Fee Reduction (if applicable) \$-0-

7. Other Fees

 Recording Assignment [\$40.00] \$-0-
 Other fees
 Specify _____ \$-0-

Total Fees Enclosed \$-0-

8. Payment of Fees
 Check(s) in the amount of \$ enclosed.

9. Information Disclosure Statement
 10. X Return Receipt Postcard
 11. Other: Specify _____

By:

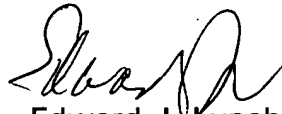
Edward J. Lynch
 Registration No. 24,422

Dated: May 27, 1994

with our check in the amount of \$2,688.00 in payment of the filing fee,
extra claims fee, extension fee, and surcharge.

Any additional fees which may be required as a result of this
communication should be charged to Deposit Account 03-3821 and should
reference Attorney Docket No. 18000.8481.0.

Respectfully submitted,



Edward J. Lynch
Attorneys for Applicant
Registration No. 24,422

Attachment: Check
 Declaration and Power of Attorney
 Petition to Extend Time
 Copy of Notice to File Missing Parts of Application

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